

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000079532

FILED
Jan 11, 2008
Secretary of State

Entity Name: FORECLOSURE SOLUTIONS OF SOUTHWEST FLORIDA, LLC

Current Principal Place of Business:

423 SE 17TH STREET
CAPE CORAL, FL 33990 US

New Principal Place of Business:

1908 NW 16TH TERRACE
CAPE CORAL, FL 33993 US

Current Mailing Address:

423 SE 17TH STREET
CAPE CORAL, FL 33990 US

New Mailing Address:

PO BOX 151301
CAPE CORAL, FL 33915 US

FEI Number: 26-0639999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALVAO, PETER
423 SE 17TH STREET
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

CALVAO, PETER
1908 NW 16TH TERRACE
CAPE CORAL, FL 33993 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PETER CALVAO

01/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CALVAO, PETER
Address: 423 SE 17TH STREET
City-St-Zip: CAPE CORAL, FL 33990 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CALVAO, PETER
Address: 1908 NW 16TH TERRACE
City-St-Zip: CAPE CORAL, FL 33993 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PETER CALVAO

MGRM

01/11/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date